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Bib Data Sheet

CONFIRMATION NO. 3341

SERIAL NUMBER 10/797,466	FILING DATE 03/10/2004 RULE	CLASS 250	GROUP ART UNIT 2881	ATTORNEY DOCKET NO. SION-P06-021
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APPLICANTS

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 Angela Zapata, Arlington, MA; Cristina E. Davis, Cambridge, MA;
 Gary A. Eiceman, Las Cruces, NM;
 Anthony D. Bashall, Concord, MA;

yes *no*
 ** CONTINUING DATA *****

This application is a CIP of 10/794,776 03/05/2004 ABN
 which claims benefit of 60/453,448 03/10/2003
 and is a CIP of 10/697,708 10/30/2003 ABN
 which claims benefit of 60/442,534 01/24/2003
 This application 10/797,466
 claims benefit of 60/453,451 03/10/2003
 and claims benefit of 60/530,815 12/18/2003
 and is a CIP of 10/462,206 06/13/2003
 which is a CIP of 10/321,822 12/16/2002 PAT 6,806,463
 and is a CIP of 10/123,030 04/12/2002 PAT 6,690,004
 and is a CIP of 10/187,464 06/28/2002
 and claims benefit of 60/389,400 06/15/2002
 and claims benefit of 60/398,616 07/25/2002
 and claims benefit of 60/418,671 10/15/2002
 and claims benefit of 60/453,287 03/10/2003
 and claims benefit of 60/468,306 05/06/2003
 This application 10/797,466
 claims benefit of 60/549,004 03/01/2004
 and is a CIP of 10/321,822 12/16/2002 PAT 6,806,463
 which is a CIP of 09/358,312 07/21/1999 PAT 6,495,823

None *yes*
 ** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 05/14/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR	SHEETS	TOTAL	INDEPENDENT
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Zia R. Hashmi



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BIBDATASHEET

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SERIAL NUMBER	FILING OR 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
10/797,466	03/10/2004	250	2881	SION-P06-021
RULE				

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**** FOREIGN APPLICATIONS *********IF REQUIRED, FOREIGN FILING LICENSE GRANTED****** 05/14/2004**

Foreign Priority claimed	<input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY MA	SHEETS DRAWING 42	TOTAL CLAIMS 51	INDEPENDENT CLAIMS 5
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature	Initials			

ADDRESS

28120

TITLE